VOLUNTEER APPLICATION

WASHINGTON STATE PATROL
WSP

PERSONAL INFORMATION

Last Name	First Name	Middle	Maiden or Other Names Known By

Address		City	State	ZIP

Home Phone ( )	Cell/Other Phone ( )

E-Mail Address	Date of Birth	Female ☐ Male ☐

AVAILABILITY

List location(s) you are willing to provide service:

On what basis do you wish to provide this service? (check one)

☐ General Volunteer   ☐ Project Volunteer   ☐ Intern (for academic credit)

☐ State Patrol Historical Advisory Board Member   ☐ Other: _____

When will you be available to provide volunteer services?

☐ On Call/Occasionally

☐ One Time (Date _____ , between the hours of _____ and _____)

☐ Regularly on: S ☐ M ☐ T ☐ W ☐ Th ☐ F ☐ Sa ☐   For _____ days per month

    Hours of Availability _____

    Date Available to Start _____ Anticipated End Date _____

EDUCATION

High School (or equivalent)	City, State	Grade Completed	Course of Study
College (or other training)	City, State	Grade Completed	Course of Study
College (or other training)	City, State	Grade Completed	Course of Study

SKILLS

Type of volunteer services(s) you wish to provide:

List the skills you possess related to your desired assignment, including office equipment and software you are familiar with operating:

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EXPERIENCE

List all work and volunteer experience related to your desired assignment. Attach additional sheets if necessary.

Name of Employer		Dates of Employment	
		From	To
Job Title	Address	Hours Worked _____ hours per ☐ Week ☐ Month	
Supervisor	Email Address	Phone ( )	
Specific Duties			

Name of Employer		Dates of Employment	
		From	To
Job Title	Address	Hours Worked _____ hours per ☐ Week ☐ Month	
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VOLUNTEER APPLICATION

WSP

REFERENCES

If you were referred by anyone employed by the Washington State Patrol, please list their information:

Name	Title

Please list three references (not related to you)

Name	Email Address		Phone ( )
Address		City	State	ZIP

Name	Email Address		Phone ( )
Address		City	State	ZIP

Name	Email Address		Phone ( )
Address		City	State	ZIP

REQUIREMENTS

I understand and agree to the following requirements to obtain a volunteer position with the WSP:

- A. I must be 18 years of age or older.
- B. I must pass a polygraph examination and background investigation.
- C. I must be willing to be photographed for identification purposes.
- D. I must conform to policies and regulations of the Washington State Patrol.
- E. I must complete an appropriate orientation/training program.
- F. I must meet attendance and performance commitments.
- G. I will not receive compensation from the Washington State Patrol for my volunteer services.

I understand that as a volunteer I am not considered to be a Washington State Patrol employee, and I do not have authority to perform law enforcement duties.

Signature	Date

VOLUNTEER APPLICATION

FOR DEPARTMENT USE ONLY

APPROVAL FOR ASSIGNMENT

☐ **Forward candidate to Polygraph Examination and Background Investigation**

☐ **Volunteer services not needed at this time**

☐ **Candidate does not meet requirements**

Application Screened by Supervisor	Title	Date

Volunteer Assignment Bureau/Division/Location	Volunteer Assignment Supervisor

Anticipated Volunteer Assignment Duration Start Date: End Date:	Anticipated Volunteer Assignment Work Schedule Number of Hours Per Week: Work Days/Hours:

Volunteer Assignment Duties: **(See WSP Regulation 10.14.010. Completion of this section is required by CALEA.)**

Authorizing Signature – Appointing Authority	Title	Date
Application Screened by HRD Rep	Title	Date